

Deadline for submission: March 31, 2010

Project Title for this Grant _____

Total Grant Amount Requested \$ _____ (up to \$10,000)

Grant Abstract (100 words or less)

Applicant Information: _____
(Legal Name of Applicant's Organization)

(Mailing Address) (County)

(City / Town) (State) (Zip Code)

Project Director's Information _____
(Name – TYPED) (Title)

(Phone) (E-mail Address)

(Mailing Address) (City / State) (Zip Code)

Name of Person who Completed this Application: _____
(Name – TYPED) (Title)

Signature of Preparer of Application: _____
(Signature) (Date)

Name of Authorizing Official of Organization: _____
(Name – TYPED) (Title)

Signature of Authorizing Official: _____
(Signature) (Date)

Has your organization or institution previously received funding from the New Hampshire State Library
Conservation Grant Program? Yes ☐ No ☐

If **YES** - Year of Grant Award _____ Amount of Grant Award \$ _____

Title of Grant _____